

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 140

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Brady for Congress

Full Name (Last, First, Middle Initial)

W. Heywood Fralin

A.

Mailing Address PO Box 29600

City

Roanoke

State

VA

Zip Code

24018-0796

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Facilities of Americ

Occupation

CEO/President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

Transaction ID : A-CF17892

Amount of Each Receipt this Period

2600

Contribution

Full Name (Last, First, Middle Initial)

Keith Myers

B.

Mailing Address 402 I-49 N. Service Road

City

Sunset

State

LA

Zip Code

70584

FEC ID number of contributing
federal political committee.

C

Name of Employer

LA Health Care Group

Occupation

President/CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : A-CF18116

Amount of Each Receipt this Period

2600

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

58800.00